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<u></u>	Substitute for form 1449A/PTO			COL TE IF KNOWN		
1	INFORMATION	DIS	CLOSURE	Application Number	To be assigned 10/534582	
STATEMENT BY APPLICANT				Filing Date		
				First Named Inventor	Dube, et al.	
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	(use as many sheet	s as r	iecessary)	Examiner Name		
Sheet	1	of	1	Attorney Docket Number	MC073YP	

T			TENT DOCUMENTS	
Cite No.	U.S. Patent Document Number	Kind Code (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY
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			FORE	IGN PATENT	DOCUMENTS	
Examiner Initials*	Cite No.	Office	Foreign Patent Docume Number	nt Kind Code (if known)	Name of Patentee or Applica of Cited Document	nt Date of Publication of Cited Document MM-DD-YYYY
8r			WO 99/07704	·	Suntory Limited	02/18/1999
J			WO 02/94823		Merck Frosst Canada & Co.	11/28/2002
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Examin Signatu	er re	+			Date Considered	01/13/07

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